

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MA		12-30-01
O.I.P.E. CLASSIFIER		12	1-1-01
FORMALITY REVIEW	91		1-1-01
RESPONSE FORMALITY REVIEW	91 m	1029 701	12-12-01 4/4/02

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 ..... Allowed      I ..... Interference  
 (Through numeral) ... Canceled      A ..... Appeal  
 ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	12/29/01
2	12/29/01
3	12/29/01
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Claim	Date
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If more than 150 claims or 10 actions  
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